	hics. Yes □ No ✔	ncome, transactions, or liabilities of a spouse or dependent ch yes" unless you have first consulted with the Committee on Et	Exemptions— Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics.	
	Yes No 🗸	ttee on Ethics and certain other "excepted trusts" need not be ust benefiting you, your spouse, or dependent child?	Trusts- Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" ne disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or dependent child?	
	STIONS	ATION ANSWER EACH OF THESE QUESTIONS	EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION ANSWE	EX
		schedule attached for each "Yes" response.	If yes, complete and attach Schedule V.	
	and the appropriate	Each question in this part must be answered and the appropriate	Did you, your spouse, or a dependent child have any reportable liability Yes V No No	<
		If yes, complete and attach Schedule IX.	If yes, complete and attach Schedule IV.	
	outside Yes No	Did you have any reportable agreement or arrangement with an outside IX. entity?	Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting Yes V No Restor?	.₹
		If yes, complete and attach Schedule VIII.	if yes, complete and attach Schedule III.	
	ing in the Yes V No	Did you hold any reportable positions on or before the date of filing in the VIII. current calendar year?	Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth Yes V No more than \$1,000 at the end of the period?	Ę
		If yes, complete and attach Schedule VII.	If yes, complete and attach Schedule II.	
	le travel or lan \$350 Yes No 🗸	Did you, your spouse, or a dependent child receive any reportable travel or VII. reimbursements for travel in the reporting period (worth more than \$350 from one source)?	Did any individual or organization make a donation to charity in lieu of paying Yes No 🕢	F
		If yes, complete and attach Schedule VI.	If yes, complete and attach Schedule I.	
	le gift in herwise Yes No 🗸	Did you, your spouse, or a dependent child receive any reportable gift in VI. the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)?	Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period?	.1
		QUESTIONS	PRELIMINARY INFORMATION ANSWER EACH OF THESE QUESTIONS	PR
	more than 30 days late.	i ermination ∪ate: ation	Report → Annual (May 15) □ Amendment □ Termination	
	anyone who files	1.4		
	be assessed against	Employee	Status House of Representatives District: 01	· ·
100 100 100 100 100 100 100 100 100 100	A \$200 penalty shall	Officer Or Employing Office:	Member of the U.S. State: IN	
MC	C COffice Use Only I.B. C	(Daytime Telephone)	(Full Name)	
2	2012 HAY 10 PH 1: 52	202-225-2461	Peter J. Visclosky	
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EREU	HAND DELIVERED	FORM A For use by Members, officers, and employees	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT	દ્ર⊑
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SCHEDULE I - EARNED INCOME

Name Peter J. Visclosky

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. U.S. Department of Labor, Washington, DC Source Spouse Salary Type **Amount**

SCHEDULE III
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SP ŞP SP SP Sp If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or is jointly held with your spouse (JT), in the optional column on the far left. (unless there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest For an ownership interest in a privately-held business that is not publically traded, state the name of the business, the nature of its activities, and its geographic For rental or other real property held for investment, provide a complete address. (dentify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in in, or income derived from, a federal retirement program, including the Thrift Exclude: Your personal residence, including second homes and vacation homes location in Block A. reporting period. only the name of the institution holding the account and its value at the end of the investments), provide the value for each asset held in the account that exceeds the (i.e.,plans in which you have the power, even if not exercised, to select the specific Provide complete names of stocks and mutual funds (do not use ticker symbols.) reporting thresholds. For retirement accounts which are not self-directed, provide For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed "unearned" income during the year. Asset and/or Income Source Strategic Equity Fund Opportunities Selected Value Fund Wellington Fund IRA Rollover Vanguard Growth Fund Index Fund IRA Rollover Vanguard IRA Rollover Vanguard IRA Rollover Vanguard Morgan IRA Rollover Vanguard 500 IRA Sentinel Sustainable Core **BLOCK A** \$15,001 \$15,001 \$50,000 \$15,001 \$15,001 \$50,001 -\$50,000 \$50,000 \$50,000 \$15,001 -\$100,000 \$50,000 generated income, the included only because it is If an asset was sold and is specify the method used. market value, piease method other than fair If you use a valuation At close of reporting year. value should be "None." Value of Asset Year-End Name Peter J. Visclosky BLOCK B DIVIDENDS DIVIDENDS DIVIDENDS DIVIDENDS DIVIDENDS DIVIDENDS during the reporting period. the asset generated no income as income. Check "None" if reinvested, must be disclosed and capital gains, even if column. Dividends, interest, you may check the "None" specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs) do not allow you to choose For retirement accounts that Check all columns that apply Type of Income **BLOCK C** \$201 - \$1,000 \$1 - \$200 \$201 - \$1,000 \$201 - \$1,000 \$201 - \$1,000 or generated. assets, indicate the category of disclosed as income. Check "None" if no income was earned gains, even if reinvested, must be Dividends, interest, and capital appropriate box below. income by checking the "None" column. For all other plans or IRAs), you may check the deferred income (such as 401(k) investments or that generate taxnot allow you to choose specific or retirement accounts that do Amount of Income BLOCK D exchanges (E) exceeding \$1,000 in sales (S), or Transaction had purchases (P), ndicate if asset BLOCK E

SCHEDU	SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name	Peter J. Visclosky		Page 4 of 8
SP	Pepsico Stock Shares	\$100,001 - \$250,000	DIVIDENDS	\$2,501 - \$5,000	
SP	Roth IRA - Sentinel Sustainable Core Opportunities	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Roth IRA - Sentinel Sustainable Growth	\$1,001 - \$15,000	DIVIDENDS	\$1 - \$200	
SP	Vanguard Tax-Managed Small- CAP	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	Vanguard Total International Stock Index	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	
SP	Dept. of Labor Credit Union - Reward Checking	\$100,001 - \$250,000	INTEREST	\$201 - \$1,000	
SP	Roth IRA Vanguard International Value Fund	\$1,001 - \$15,000	DIVIDENDS	\$201 - \$1,000	
DC	Dodge & Cox Stock Fund	\$15,001 - \$50,000	DIVIDENDS	\$1,001 - \$2,500	
DC	Dodge & Cox Stock Fund	\$1,001 - \$15,000	DIVIDENDS/CAPI TAL GAINS	\$201 - \$1,000	S
DC	Mutual Quest Fund	\$15,001 - \$50,000	DIVIDENDS	\$2,501 - \$5,000	
DC	Mutual Quest Fund	\$1,001 - \$15,000	DIVIDENDS/CAPI TAL GAINS	\$1,001 - \$2,500	S
DC	People's Bank Savings Account	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
DC	People's Bank Savings Account	\$1,001 - \$15,000	INTEREST	\$1 - \$200	
	People's Bank Checking Account	\$100,001 - \$250,000	INTEREST	\$201 - \$1,000	

SCHEDULE III - ASSETS AND "UNEARNED" INCOME	Name Peter J. Visclosky	Visclosky	
Congressional Federal Credit	\$1 - \$1,000	None	NONE

SCHEDOL	SCHEDOLE III - ASSE IS AND CHEARNED INCOME	Name Peter J. Visclosky	Visclosky		Page 5 of 8
	Congressional Federal Credit Union Checking Account	\$1 - \$1,000	None	NONE	
	Merrill Lynch Bank - IRA (Cash)	\$100,001 - \$250,000	INTEREST	\$1 - \$200	
	Northwest Indiana Bancorp - IRA (Stock)	\$15,001 - \$50,000	DIVIDENDS	\$201 - \$1,000	

SCHEDULE IV - TRANSACTIONS

Name Peter J. Visclosky

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transaction. Do not report a transaction between you, your spouse, or your dependent child, or the purchase or sale of your personal residence, unless it is rented out. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below. Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting year of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded \$1,000. Include transactions that resulted in a loss. Provide a brief description of any exchange

77,00,4	Asset	Type of Transaction	Capital Gain in Excess of \$200?	Date	Amount of Transaction
DC	Dodge & Cox Stock Fund	Ø	Yes	01-24-11	
DC	Mutual Quest Fund	Ø	Yes	01-24-11	_

Name Peter J. Visclosky

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personal residences. Report llabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless all or part of it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report "revolving charge accounts" (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. NOTE: Pending legislation may require Members to report mortgates on

	SP, DC,
People's Bank, Munster, Indiana	Creditor
December, 1987	Date Liability Incurred
Mortgage on Personal Residence, Merrillville, Indiana	Type of Liability
\$15,001 - \$50,000	Amount of Liability

SCHEDULE VIII - POSITIONS

Name Peter J. Visclosky

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Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or any business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude: Positions held in any religious, social, fraternal, or political entities; positions solely of an honorary nature; and positions listed on Schedule I.

Position	Name of Organization
Trustee	The Visclosky Foundation, P.O. Box 10847, Merrillville, Indiana, 46411